Fill in this inf	ormation to ide	entify your case	and this filing:		
Debtor 1	Elsie	N.	Umoh		
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for t	he: <b>EASTERN DIS</b>	STRICT OF TEXAS		
Case number (if known)					if this is an ded filing
Official Form	-				
Schedule A	B: Property				12/15
Part 1: De  1. Do you own o	Scribe Each Re	y additional pages, esidence, Buildi or equitable interes	ring correct information. If more write your name and case numng, Land, or Other Real E	state You Own or Have	ery question.
1.1. Street address, if avail	able, or other descripti	Check all  ✓ Singl  ☐ Duple	he property? that apply. e-family home ex or multi-unit building lominium or cooperative	Do not deduct secured cla amount of any secured cla Creditors Who Have Claim Current value of the entire property?	ims on Schedule D:
3401 Kimberly City  Denton	Or. Ca TX 750 State ZIP 0	07	afactured or mobile home	\$224,000.00  Describe the nature of your interest (such as fee simple entireties, or a life estate	ple, tenancy by the
County		_	an interest in the property?	Fee Simple	
Homestead 3401 Kimberly I Carrollton, TX 7 Rosemeade Add		Debte		Check if this is comn (see instructions)	nunity property
			ormation you wish to add abou identification number:	t this item, such as local	
		tion you own for all	of your entries from Part 1, inc	- ·	\$224,000.00
Part 2: De	scribe Your Ve	hicles			
Do you own, leas	e, or have legal or	equitable interest i	in any vehicles, whether they are also report it on Schedule G: Exc		•
3. Cars, vans, to	rucks, tractors, sp	ort utility vehicles,	motorcycles		
□ No ☑ Yes					

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1 Elsie N	N. Umoh		Case number (if known)	
3.1. Mak		Nissan Sentra	Who has an interest in the property?  Check one.  Debtor 1 only	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim	ms on Schedule D:
Year	:	2016	Debtor 2 only	Current value of the	Current value of the
Appı	roximate mileage	1,500	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anot	entire property? her \$12,850.00	portion you own? \$12,850.00
		ra (approx. 1500	Check if this is community proper (see instructions)		Ψ12,030.00
4.			s and other recreational vehicles, other onal watercraft, fishing vessels, snowmobile		
5.	Add the dollar		u own for all of your entries from Part 2, i or Part 2. Write that number here	_	\$12,850.00
Pa	art 3: Desc	cribe Your Persona	I and Household Items	•	
Do y	ou own or have	e any legal or equitable	interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Examples: Majo	ods and furnishings or appliances, furniture, li ibe See continuati	inens, china, kitchenware		\$3,030.00
7.	Electronics Examples: Tele	evisions and radios; audio	o, video, stereo, and digital equipment; com devices including cell phones, cameras, mo	-	
	□ No ☑ Yes. Descr	ibe Computers (5)	, iPad, 60" Televison (2), CD Player,	Camera	\$2,000.00
8.		ques and figurines; paint	ings, prints, or other artwork; books, picture discollections; other collections, memorabilia,		
	✓ No ☐ Yes. Descr	ibe			
9.	Examples: Spo		se, and other hobby equipment; bicycles, por ry tools; musical instruments	ool tables, golf clubs, skis;	
	✓ No ☐ Yes. Descr	ibe			
10.	•	ols, rifles, shotguns, amn	nunition, and related equipment		
	✓ No  Yes. Descr	ibe			
11.		ryday clothes, furs, leath	er coats, designer wear, shoes, accessories	5	
		ibe All Clothing			\$300.00
12.	gold	ryday jewelry, costume je I, silver	ewelry, engagement rings, wedding rings, he	eirloom jewelry, watches, gems,	
	☐ No ✓ Yes. Descr	ibe <b>Jewelrv</b>			\$300.00

Deb	tor 1	Elsie N. Umoh	Case number (if known)			
13.		m animals es: Dogs, cats, birds	, horses			
	□ No I√ Yes	. Describe Pet I	Dog	\$200.00		
14.	_	er personal and ho	usehold items you did not already list, including any health aids you			
	✓ No ☐ Yes	. Give specific				
45		rmation	form and in form Bord O in the line and only in form and in form			
15.			of your entries from Part 3, including any entries for pages you have the number here	→ \$5,830.00		
Pa	art 4:	Describe Your	Financial Assets			
Do y	ou own	or have any legal o	r equitable interest in any of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.		
16.		es: Money you have petition	in your wallet, in your home, in a safe deposit box, and on hand when you file you	ır		
	☐ No Yes		Cash:	\$0.00		
17.	Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.					
	□ No					
			Institution name:			
	17.	Checking acco	unt: Checking account ending in 3582 Bank of America	\$453.02		
	17.	2. Checking acco	Checking account ending in 3647 Bank of America	\$0.00		
	17.	3. Savings accou	Savings account ending in Bank of America 7263	\$845.00		
18.			blicly traded stocks stment accounts with brokerage firms, money market accounts			
	✓ No ☐ Yes		Institution or issuer name:			
19.	-	-	and interests in incorporated and unincorporated businesses, including ership, and joint venture			
	info	. Give specific rmation about n	Name of entity: % of owners	hip:		
20.	Negotia	<i>ble instrument</i> s inclu	bonds and other negotiable and non-negotiable instruments de personal checks, cashiers' checks, promissory notes, and money orders. are those you cannot transfer to someone by signing or delivering them.			
	info	. Give specific rmation about n	lssuer name:			

Debt	tor 1 Elsie N. Umoh		Case number (if known)	
21.	Retirement or pension account Examples: Interests in IRA, ERI profit-sharing plans		(b), thrift savings accounts, or other pension or	
	✓ No ☐ Yes. List each account separately. Type	of account: Institut	tion name:	
22.	•	ts you have made so tha	at you may continue service or use from a company olic utilities (electric, gas, water), telecommunications	
	<b>☑</b> No			
	Yes		n name or individual:	
23.	No No	cific periodic payment of	f money to you, either for life or for a number of years)	
	YesIssu	uer name and description	n:	
24.	Interests in an education IRA, 26 U.S.C. §§ 530(b)(1), 529A(b)		ified ABLE program, or under a qualified state tuition pro	gram.
	✓ No	titution name and descrip	stion. Congretally file the records of any interests. 11 LLS C	\$ <b>5</b> 21(a)
25.	<del>_</del>	erests in property (other	otion. Separately file the records of any interests. 11 U.S.C. r than anything listed in line 1), and rights or	g 321(c)
	<b>⋈</b> No			
	Yes. Give specific information about them			
26.	Patents, copyrights, trademark Examples: Internet domain name		other intellectual property; from royalties and licensing agreements	
	<ul><li>✓ No</li><li>✓ Yes. Give specific information about them</li></ul>			
27.	Licenses, franchises, and othe Examples: Building permits, exc		ative association holdings, liquor licenses, professional licens	ses
	✓ No  Yes. Give specific information about them			
Mon	ney or property owed to you?			Current value of the
Wion	ley of property owed to you:			portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	✓ No  Yes. Give specific informati	ion	Federal	
	about them, including wheth you already filed the returns		State:	
	and the tax years		Local:	
29.	Family support  Examples: Past due or lump sui	m alimony spousal supr	port, child support, maintenance, divorce settlement, property	settlement
	✓ No	, speadal supp	, and a series of the series o	
	Yes. Give specific information	ion	Alimony:	
			Maintenance:	
			Support:	
			Divorce settlement:	
			Property settlement	<u>-</u>

Deb	tor 1	Elsie N. Umoh	Case number (if known)	
30.		nounts someone owes you s: Unpaid wages, disability insurance payments, disability benefits, sick compensation, Social Security benefits; unpaid loans you made to so		
	✓ No ☐ Yes.	Give specific information		
31.		s in insurance policies s: Health, disability, or life insurance; health savings account (HSA); cre	dit, homeowner's, or renter's insura	ance
	Yes.	Name the insurance pany of each policy list its value Company name:	Beneficiary: So	urrender or refund value:
32.	If you ar	rest in property that is due you from someone who has died ethe beneficiary of a living trust, expect proceeds from a life insurance poreceive property because someone has died	olicy, or are currently	
	✓ No ☐ Yes.	Give specific information		
33.	Example	against third parties, whether or not you have filed a lawsuit or made is: Accidents, employment disputes, insurance claims, or rights to sue	a demand for payment	
	✓ No ☐ Yes.	Describe each claim		
34.	rights to	ontingent and unliquidated claims of every nature, including counter set off claims	claims of the debtor and	
	✓ No ☐ Yes.	Describe each claim		
35.	Any fina	ncial assets you did not already list		
	✓ No ☐ Yes.	Give specific information		
36.		dollar value of all of your entries from Part 4, including any entries f		\$1,298.02
Pa	art 5: [	Describe Any Business-Related Property You Own or Ha	ו ive an Interest In.  List anv	real estate in Part 1
		own or have any legal or equitable interest in any business-related p		
	✓ No.	Go to Part 6. Go to line 38.		
	_			Current value of the
				portion you own?  Do not deduct secured
38.	Accoun	s receivable or commissions you already earned		claims or exemptions.
	✓ No ☐ Yes.	Describe		
39.		quipment, furnishings, and supplies s: Business-related computers, software, modems, printers, copiers, fax desks, chairs, electronic devices	machines, rugs, telephones,	
	✓ No ☐ Yes.	Describe		
40.	Machine	ery, fixtures, equipment, supplies you use in business, and tools of y	our trade	
	✓ No ☐ Yes.	Describe		
41.	Invento	у		
	✓ No ☐ Yes.	Describe		

Deb	tor 1	Elsie N. Umoh	Case number (if known)	
42.	Interest	s in partnerships or joint ventures		
43.		. Describe Name of entity: per lists, mailing lists, or other compilations	% of ownership:	
	✓ No ☐ Yes	. Do your lists include personally identifiable information (as defin No Yes. Describe	ned in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related property you did not already list		
	✓ No ☐ Yes	. Give specific information.		
45.		dollar value of all of your entries from Part 5, including any entried for Part 5. Write that number here		\$0.00
Pa		Describe Any Farm- and Commercial Fishing-Related I f you own or have an interest in farmland, list it in Part 1.	Property You Own or Have an	Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or comme	rcial fishing-related property?	
		Go to Part 7. . Go to line 47.		
			<b>!</b> [	Current value of the cortion you own?  Do not deduct secured claims or exemptions.
47.	Farm an Example No ☐ Yes	es: Livestock, poultry, farm-raised fish		
48.	Crops	either growing or harvested		_
	_	. Give specific rmation	-	
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools o	f trade	
	✓ No ☐ Yes		-	
50.	Farm a	nd fishing supplies, chemicals, and feed		
	✓ No ☐ Yes	<del></del> .		
51.	Any far	m- and commercial fishing-related property you did not already list	t	
		. Give specific rmation	-	
52.		dollar value of all of your entries from Part 6, including any entried for Part 6. Write that number here		\$0.00
Pa	art 7:	Describe All Property You Own or Have an Interest in	That You Did Not List Above	
53.	-	have other property of any kind you did not already list? es: Season tickets, country club membership		
	✓ No ☐ Yes	. Give specific information.		

Debtor 1	Elsie N. Umoh	Case nu	ımber (if known)	
	ne dollar value of all of your entries from Part 7. Write t	hat number here	<del>)</del>	\$0.00
55. Part 1	: Total real estate, line 2		÷	\$224,000.00
56. Part 2	: Total vehicles, line 5	\$12,850.00		
57. Part 3	: Total personal and household items, line 15	\$5,830.00		
58. Part 4	: Total financial assets, line 36	\$1,298.02		
59. Part 5	: Total business-related property, line 45	\$0.00		
60. Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7	: Total other property not listed, line 54	+ \$0.00		
62. Total į	personal property. Add lines 56 through 61	\$19,978.02	Copy personal property total	+\$19,978.02
63. Total	of all property on Schedule A/B. Add line 55 + line 62.			\$243,978.02

Del	otor 1 Elsie N. Umoh	Case number (if known)	
6.	Household goods and furnishings (details):		
	Fridge, Slow Cooker, Blender		\$1,500.00
	Master Bedroom King Bed, Dressers (2), Lamp		\$350.00
	Son's Bedroom Queen Bed		\$150.00
	Living Room Couch, Decorative accessories, Coffee Table, Side Tables (2)		\$500.00
	Dining Room Table & Chairs (6) Decorative Accessories		\$150.00
	Office Desk, Chair & Footrest Bookshelf		\$350.00
	Kitchen Bar Stools (2)		\$30.00

Fill in this information to identify your case:							
Debtor 1	Elsie First Name	N. Middle Name	Umoh Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF TEXAS</b>							
Case number (if known)							

Check if this is an amended filing

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

<ol> <li>Which set of exemptions are you claiming?</li></ol>	ankruptcy exemptions. 1 U.S.C. § 522(b)(2)	11 U.		·
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description: Homestead 3401 Kimberly Dr. Carrollton, TX 75007 Rosemeade Addn 15 Blk 55 Lot 7 Line from Schedule A/B:1.1	\$224,000.00		\$74,000.00 100% of fair market value, up to any applicable statutory limit	Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001002
Brief description:  Fridge, Slow Cooker, Blender  Line from Schedule A/B: 6	\$1,500.00		\$1,500.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Brief description:  Master Bedroom  King Bed, Dressers (2), Lamp  Line from Schedule A/B: 6	\$350.00		\$350.00 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
3. Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every   No  Yes. Did you acquire the property cover  No	3 years after that for cas	es fil		•

Debtor 1 Elsie N. Umoh Case number (if known)

Part 2: Additional Page				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description:	\$150.00	$\overline{\mathbf{A}}$	\$150.00	Tex. Prop. Code §§ 42.001(a),
Son's Bedroom			100% of fair market	42.002(a)(1)
Queen Bed			value, up to any	
Line from Schedule A/B:6			applicable statutory limit	
Brief description:	\$500.00	V	\$500.00	Tex. Prop. Code §§ 42.001(a),
Living Room			100% of fair market	42.002(a)(1)
Couch, Decorative accessories, Coffee Fable, Side Tables (2)			value, up to any applicable statutory	
ine from Schedule A/B:6			limit	
Brief description:	\$150.00	<u> </u>	\$150.00	Tex. Prop. Code §§ 42.001(a),
Dining Room	_		100% of fair market	42.002(a)(1)
Table & Chairs (6)			value, up to any	
Decorative Accessories			applicable statutory limit	
Line from Schedule A/B:6			mill	
Brief description:	\$350.00	$\overline{\mathbf{V}}$	\$350.00	Tex. Prop. Code §§ 42.001(a),
Office			100% of fair market	42.002(a)(1)
Desk, Chair & Footrest Bookshelf			value, up to any applicable statutory	
Line from Schedule A/B: 6			limit	
Brief description:	\$30.00		\$30.00	Tex. Prop. Code §§ 42.001(a),
Kitchen	Ψ30.00		100% of fair market	42.002(a)(1)
Bar Stools (2)		Ч	value, up to any	(/( - /
_ine from Schedule A/B:6			applicable statutory	
			limit	
Brief description:	\$2,000.00		\$2,000.00	Tex. Prop. Code §§ 42.001(a),
Computers (5), iPad, 60" Televison (2), CD Player, Camera			100% of fair market	42.002(a)(1)
Line from <i>Schedule A/B:</i> <b>7</b>			value, up to any applicable statutory	
in in in our our out of the in			limit	
Brief description:	\$300.00	$\overline{\mathbf{V}}$	\$300.00	Tex. Prop. Code §§ 42.001(a),
All Clothing			100% of fair market	42.002(a)(5)
Line from Schedule A/B:11			value, up to any applicable statutory	
			limit	
Brief description:	\$300.00	$\overline{\mathbf{Q}}$	\$300.00	Tex. Prop. Code §§ 42.001(a),
Jewelry			100% of fair market	42.002(a)(6)
Line from Schedule A/B:12			value, up to any applicable statutory limit	
Brief description:	\$200 00		\$200.00	Toy Prop Code \$5.42.004/-\
Pet Dog	\$200.00	$\square$	100% of fair market	Tex. Prop. Code §§ 42.001(a), 42.002(a)(11)
<u> </u>			value, up to any	.=.00=(a)(.1)
Line from Schedule A/B:13			applicable statutory	
			limit	

	ormation to identi					
Debtor 1		<b>N.</b> Middle Name	Umoh Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the: I	EASTERN DIS	TRICT OF TEXAS			
Case number	. ,					
(if known)					Check if this is amended filing	
Official Form	106D					
Schedule D:	Creditors Who	Have Cla	ims Secured by	Property		12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).    Do any creditors have claims secured by your property?   No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   Yes. Fill in all of the information below.    Part 1: List All Secured Claims   List All Secured Claims   If a creditor has more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.    Describe the property that secures the claim:						
Ocwen Loan Se Creditor's name		<ul> <li>Homestead</li> </ul>	I			
Attn: Bankrupto Number Street 1661 Wortingtor	•	_				
1661 Wortingtor	1 Rd, Suite 100	As of the dat  Continge	te you file, the claim is:	Check all that apply.		
West Palm Beac	<b>State</b> 33409-6493 State ZIP Code	Unliquida				
Who owes the del	ot? Check one.	☐ Disputed  Nature of lie	n. Check all that apply.			
Debtor 1 only Debtor 2 only		An agree	ment you made (such as		car Ioan)	
Debtor 1 and D	Debtor 2 only	=	lien (such as tax lien, mat lien from a lawsuit	echanic's lien)		
At least one of	the debtors and another	r 🗀 🗼	cluding a right to offset)			
Check if this of to a communication		Mortgaç	ge			
Date debt was inc	urred	Last 4 digits	of account number	0 9 6 9		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$150,000.00

Debtor 1	Elsie N. Umoh		_ Case number (if	known)	
Part 1:	Additional Page  Part 1: After listing any entries on this page, number them sequentially from the previous page.			Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor's nam Attn: Bani Number Str 1661 Worti  West Palm City Who owes t Debtor 1 Debtor 2 Debtor 1 At least Check i	Beach FL 33409-6493 State ZIP Code he debt? Check one. only	Describe the property that secures the claim: Homestead  As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) Arrearage claim	mortgage or secured	\$20,884.42 car loan)	
	as incurred <u>Various</u>	Last 4 digits of account number	0 9 6 9		
Creditor's nam 8585 N. St	Consumer Loan e emmons Freeway, Ste. 11	Describe the property that secures the claim: 2016 Nissan Sentra	\$18,746.00	\$12,850.00	\$5,896.00
Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least Check i	2 only and Debtor 2 only one of the debtors and another f this claim relates nmunity debt	As of the date you file, the claim is:  Contingent Unliquidated Disputed  Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit  Other (including a right to offset) Purchase Money  Last 4 digits of account number	mortgage or secured	car loan)	
		-			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$39,630.42

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$189,630.42

Debtor 1	Elsie N. Umoh			Case number (if known)	
Part 2:	List Others to Be Notified	for a l	Debt That Yoເ	ı Already Listed	
example, if then list the	a collection agency is trying to co e collection agency here. Similarly itional creditors here. If you do no	llect fro , if you	m you for a debt have more than	uptcy for a debt that you already listed in Part 1. For you owe to someone else, list the creditor in Part 1, and one creditor for any of the debts that you listed in Part 1, s to be notified for any debts in Part 1, do not fill out or	
Nam No Num 100	wer Default Services  reth Park town Center  rber Street  00 Abernathy Rd. NE			On which line in Part 1 did you enter the creditor?  Last 4 digits of account number 6 9 6 0	2.1
Atla City	anta	<b>GA</b> State	<b>30328</b> ZIP Code		

						03	700/2017 09.32.0
Fill in this inf	ormation to ide	entify your ca	ase:				
Debtor 1	Elsie	N.	Umoh				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for t	he: <b>EASTERN</b>	DISTRICT OF TEXAS	S			
Case number							
(if known)	-			-		Check if this is a amended filing	ın
Official Form	106E/F						
Schedule E/	F: Creditors	Who Have	e Unsecured Cla	aims			12/15
Do not include any If more space is not to this page. On the	y creditors with pa eeded, copy the P he top of any addi	artially secured art you need, fi tional pages, w	and on Schedule G: Exectains that are listed in the lit out, number the entirite your name and case	n <i>Schedule D</i> ries in the bo	oxes on the left. At	old Claims Secure	ed by Property.
	tors have priority i						
— Na Oak		unsecured ciam	iis agailist you:				
☐ No. Go t	o Fait 2.						
claim. For eac show both pric more space is	ch claim listed, ider ority and nonpriority	ntify what type of amounts. As m unsecured clain	creditor has more than of claim it is. If a claim ha nuch as possible, list the ns, fill out the Continuation	s both priority claims in alph	and nonpriority amo	ounts, list that clair rding to the credito	n here and or's name. If
(For an explar	nation of each type	of claim, see the	e instructions for this form	n in the instru	ction booklet.		
					Total claim	Priority amount	Nonpriority amount
2.1					\$500,000.00	\$500,000.00	\$0.00
Clerk Priority Creditor's Nam	Δ		Last 4 digits of accoun	nt number			
<b>United States Di</b>			When was the debt in	curred?			
Number Street 1100 Commerce	St., 14th Floor		A o of the data you file	the eleim is	. Chaok all that ann	-  -	
	·		As of the date you file Contingent	, tile Claiili is	. Спеск ан тат арр	ıy.	
Dallas	TX 7		Unliquidated				
City		IP Code	Disputed				
Who incurred the Debtor 1 only	debt? Check on	e.	Type of PRIORITY uns		1:		
Debtor 2 only			☐ Domestic support of Taxes and certain of	-	u owe the governme	ent	
Debtor 1 and D	Debtor 2 only the debtors and an	other	Claims for death or				
ш	claim is for a com		intoxicated  Other. Specify				
Is the claim subject			Li Gallon Opcony				

✓ No ☐ Yes

**Restitution Agreement** 

Debtor 1 Elsie N. Umoh	Cas	e number (if known)		
Part 1: Your PRIORITY Unsecured C	Claims Continuation Page			
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim	Priority amount	Nonpriority amount
2.2		\$0.00	\$0.00	\$0.00
Emanuel Umoh	Last 4 digits of account number		_	
Priority Creditor's Name 3809 Clearwater Court	_			
Number Street	When was the debt incurred?			
Plano TX 75025 City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	As of the date you file, the claim is:	: u owe the governme		
2.3		\$80,000.00	\$80.000.00	\$0.00
Office of the Attorney General of Texas			,	
Priority Creditor's Name	_	<u>x x x x x</u>		
Child Support Division Number Street	When was the debt incurred?			
Dallas TX 75223  City State ZIP Code  Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	<ul> <li>As of the date you file, the claim is:</li></ul>	: u owe the governme		
2.4		\$2,500.00	\$2,500.00	\$0.00
The Page Law Firm, P.C. Priority Creditor's Name	Last 4 digits of account number			
2195 N. Dallas Parkway	When was the debt incurred? 04	 1/28/2010		
Number Street Suite 408	<del>-</del>			
Oute 400	As of the date you file, the claim is:  Contingent	Check all that apply	<b>y</b> .	
Erican TV 75024	Contingent Unliquidated			
Frisco         TX         75034           City         State         ZIP Code	_			
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	Type of PRIORITY unsecured claim  ☐ Domestic support obligations ☐ Taxes and certain other debts you ☐ Claims for death or personal injur intoxicated ☐ Other. Specify Attorney fees for this case	u owe the governme	nt	

Debtor 1	Elsie N. Umoh	Case number (if known)
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims
4.1  Bridgecre Nonpriority C 7300 E. H Number  Mesa City Who incur Debtor Debtor Debtor At leas Check	Il of your nonpriority unsecured claims editor has more than one nonpriority unsecuted claim it is. Do not list claims already inclaim. If more space is needed for nonpriority unsecuted for nonpriorit	Submit this form to the court with your other schedules.  In the alphabetical order of the creditor who holds each claim. Sured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in insecured claims, fill out the Continuation Page of Part 2.  Total claim  \$13,626.00  Last 4 digits of account number x x x x x  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Deficiency Balance
Woodland City Who incur Debtor Debtor At leas Check	d Hills  CA 91365  State ZIP Code red the debt? Check one.	Last 4 digits of account number x x x x x  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for -

Eisie N. Umon	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$350.00
Credit One Bank	Last 4 digits of account number2 _7 _4 _0_	
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
_as Vegas NV 89193		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
s the claim subject to offset?		
☑ No □ Yes		
4.4		\$450.00
_ane Bryant	Last 4 digits of account number 7 1 1 6	
Nonpriority Creditor's Name	When was the debt incurred? December 2015	
Comenity Bank Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 182782	Contingent	
	Unliquidated	
Columbus OH 43218-2782	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
☑ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify  Credit Card	
s the claim subject to offset?		
<b>√</b> No		
Yes		
4.5		£4 000 00
	Last 4 digits of account number	\$1,800.00
Progressive Financial Services, Inc. Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 24216	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
Гетре AZ 85285-4216	Disputed	
Fempe         AZ         85285-4216           Dity         State         ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify  Collecting for -	
s the claim subject to offset?	Consound for -	
✓ No		
Yes		

Debtor 1 Elsie N. Umoh Case number (if known) Your NONPRIORITY Unsecured Claims -- Continuation Page Part 2: After listing any entries on this page, number them sequentially from the Total claim previous page. 4.6 \$170,254.00 Sallie Mae Education Credit Finance Corp Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? c/o Sallie Mae, Inc. As of the date you file, the claim is: Check all that apply. 220 Lasley Ave Contingent Unliquidated Disputed Wilkes-Barre PΑ 18706 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Student Loans Is the claim subject to offset? **☑** No Yes 4.7 \$353.00 Last 4 digits of account number **Security Credit Service** X X X X Nonpriority Creditor's Name When was the debt incurred? 2623 W. Oxford Loop As of the date you file, the claim is: Check all that apply. Number Street ☐ Contingent Unliquidated Disputed 38655 Oxford MS Citv ZIP Code Type of NONPRIORITY unsecured claim: State Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Collecting for -Is the claim subject to offset? **☑** No

Yes

03/06/2017 09:52:02pm

Debtor 1	Elsie N. Umoh	Case number (if known)
Part 3:	List Others to Be Notified About a Debt That You Alrea	dy Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Ashley B. Carroll			On wh	nich entr	y in Part 1 or F	art 2	2 did you list the original creditor?
Name State of Texas			Line	O	f (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street					. (0.10011 0110).		Part 2: Creditors with Nonpriority Unsecured Claims
Office of the Attorney			_			Ц	1 art 2. Orealtors with Nonpholity offsecured Glaims
6100 Western Place, S	Suite 405		— Last 4	digits o	of account num	ber	
Fort worth	TX	76107	_	3			
City	State	ZIP Code					
Department of Educat	ion/NeIn	et	On wh	nich entr	y in Part 1 or F	art :	2 did you list the original creditor?
Name 121 S. 13th St.			 Line	<b>46</b> of	f (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street				4.0	(Oneck one).	ᆜ	
			_			✓	Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4	digits o	f account num	ber	
Lincoln City	NE State	68508 ZIP Code	_				
Oity	Olate	Zii Gode					
INTERNAL REVENUE	SERVICE	<b></b>	On wh	nich entr	y in Part 1 or F	art 2	2 did you list the original creditor?
Name CENTRALIZED INSOL	VENCY (	PERATIONS	Line	O	f (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number Street					,		Part 2: Creditors with Nonpriority Unsecured Claims
PO BOX 7346			_			Ы	ran in an
			— Last 4	digits o	of account num	ber	
PHILADELPHIA City	PA State	19101-7346 ZIP Code					
City	State	ZIF Code					
IRS			On wh	nich entr	y in Part 1 or F	art :	2 did you list the original creditor?
Name			— Line	21 0	f (Chook ono):		Part 1: Craditors with Priority Unacquired Claims
Atten: MPU, Stop 151 Number Street			Line _	2.1	(Crieck orie).	<u>_</u>	Part 1: Creditors with Priority Unsecured Claims
PO Box 47421							Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4	digits o	f account num	ber	
Doraville	GA	30362	_	g			<del></del>
City	State	ZIP Code	<del></del>				
Office of the Attorney	General		On wh	nich entr	v in Part 1 or F	Part :	2 did you list the original creditor?
Name			_				
Bankruptcy & Collecti	ons Divis	sion	_ Line _	2.2	(Check one):	$\checkmark$	Part 1: Creditors with Priority Unsecured Claims
PO Box 12548			_				Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4	digits o	f account num	ber	
Austin City	TX State	<b>78711-2548</b> ZIP Code	_				
- 9							

Debtor 1 Elsie N. Umoh Case number (if know	n)
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### Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$80,000.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$500,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. 🖣	\$2,500.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$582,500.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. <b>-</b>	<b>\$186,986.00</b>
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$186,986.00

First Name Middle Name Last Name  Debtor 2 Debtor 3 Debtor 4 Debto	ill in this inf	ormation to iden	tify your case:				
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS  Case number	Debtor 1						
(Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS  Case number	Dobtor 2	riistivaine	Middle Name	Lastiname			
Case number		First Name	Middle Name	Last Name			
	United States Bar	nkruptcy Court for the	: EASTERN DISTR	CT OF TEXAS			
	Case number (if known)				1	П	

Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

03/06/2017 09:52:02pm

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this inf	II in this information to identify your case:					
Debtor 1	Elsie First Name	<b>N.</b> Middle Name	Umoh Last Name			
Debtor 2	i iist ivaine	Middle Name	Lastiname			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court fo	or the: <b>EASTERN DIS</b>	TRICT OF TEXAS			
Case number						
(if known)						

## Official Form 106H

### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)
	<b>☑</b> No
	Yes
2.	Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
	No. Go to line 3.
	Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
	☑ No
	☐ Yes
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Debtor 1 Elsie	N.	Umoh		
First Na	me Middle Na	ame Last Name	c	heck if this is:
Debtor 2 (Spouse, if filing) First Na	me Middle Na	ame Last Name	[	An amended filing
(-1 , 3)		RN DISTRICT OF TEXAS	.	A supplement showing postpetition
United States Bankruptcy Co Case number (if known)	dittior the. <u>LAGILIN</u>	THE DISTRICT OF TEXAS		chapter 13 income as of the following da
fficial Form 106I				MM / DD / YYYY
chedule I: Your Inc	ama			42/
chequie i: Your inc	ome			12/
out your spouse. If more sur name and case number (  Part 1: Describe Em  Fill in your employment	oace is needed, attach if known). Answer ev	n a separate sheet to this very question.	•	n you, do not include information of any additional pages, write
out your spouse. If more sur name and case number (  Part 1: Describe Em  Fill in your employment information.	oace is needed, attach if known). Answer ev	separated and your spous n a separate sheet to this	•	•
put your spouse. If more spur name and case number (  Part 1: Describe Em  Fill in your employment information.  If you have more than one job, attach a separate page	pace is needed, attach if known). Answer ev ployment	separated and your spous a separate sheet to this very question.  Debtor 1  Eus	•	Debtor 2 or non-filing spouse
out your spouse. If more sur name and case number (  Part 1: Describe Em  Fill in your employment information.  If you have more than one	pace is needed, attach if known). Answer ev ployment Employment stat	Debtor 1  Eus Employed  Not employed	form. On the top o	of any additional pages, write  Debtor 2 or non-filing spouse
put your spouse. If more sur name and case number (  Part 1: Describe Em  Fill in your employment information.  If you have more than one job, attach a separate page with information about	pace is needed, attach if known). Answer ev ployment  Employment stat Occupation	separated and your spous a separate sheet to this very question.  Debtor 1  Eus	form. On the top o	Debtor 2 or non-filing spouse
Part 1: Describe Em  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.	pace is needed, attach if known). Answer ev ployment  Employment stat Occupation	Debtor 1  Eus Employed  Registered Nurs	form. On the top o	Debtor 2 or non-filing spouse
Part 1: Describe Em  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasona or self-employed work.  Occupation may include	ployment  Employer's addre	Debtor 1  Tus Employed  Registered Nurse  Christus Health	form. On the top of	Debtor 2 or non-filing spouse
put your spouse. If more spur name and case number (  Part 1: Describe Em  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasona or self-employed work.	ployment  Employer's addre	Debtor 1  Tus Employed  Registered Nurse  Christus Health	form. On the top of	Debtor 2 or non-filing spouse
out your spouse. If more sign name and case number ( Part 1: Describe Em  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasona or self-employed work.  Occupation may include student or homemaker, if it	ployment  Employer's addre	Debtor 1  The sus    T	form. On the top of	Debtor 2 or non-filing spouse  Employed Not employed
out your spouse. If more sign name and case number ( Part 1: Describe Em  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasona or self-employed work.  Occupation may include student or homemaker, if it	ployment  Employer's addre	Debtor 1  The sus    T	form. On the top of	Debtor 2 or non-filing spouse  Employed Not employed
Part 1: Describe Em  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasona or self-employed work.  Occupation may include student or homemaker, if it	ployment  Employer's addre	Debtor 1  The sus    T	form. On the top of	Debtor 2 or non-filing spouse  Employed Not employed

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$5,780.67	
3.	Estimate and list monthly overtime pay.	3. +	\$1,061.67	
4.	Calculate gross income. Add line 2 + line 3.	4.	\$6,842.34	

Deb	otor 1 Elsie N. Umoh		Case nur	mber (if know	า)	
		F	or Debtor 1	For Debto non-filing	r 2 or	
	Copy line 4 here	4.	\$6,842.34			
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$1,134.12			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	\$0.00			
	5f. Domestic support obligations	5f.	\$800.00			
	5g. Union dues	5g.	\$0.00			
	5h. Other deductions. Specify:	5h. <b>+</b>	\$0.00			
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	6.	\$1,934.12			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$4,908.22			
8.	List all other income regularly received:					
	<ol> <li>Net income from rental property and from operating a business, profession, or farm</li> </ol>	8a.	\$0.00			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$0.00			
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00			
	8g. Pension or retirement income	8g.	\$0.00			
	8h. Other monthly income.					
	Specify:	_ <sup>8h.</sup> +	\$0.00			
9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00			
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$4,908.22	+	]=	\$4,908.22
11.	State all other regular contributions to the expenses that you list in sinclude contributions from an unmarried partner, members of your house			ır raammataa	and atha	
	friends or relatives.	illola, you	ir dependents, you	ii roommates	and othe	·I
	Do not include any amounts already included in lines 2-10 or amounts the			expenses liste	ed in Sche	
	Specify:				11. <b>+</b>	- \$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilities if it applies				12.	\$4,908.22 Combined
12	if it applies.  Do you expect an increase or decrease within the year after you file	thic form	12			monthly income
13.			••			
	✓ No. None.  Yes. Explain:					

Debtor 1		ify your case:			Check if th	nis is:			
	Elsie First Name	N. Middle Name	Umo Last Na		ш.	mended filing			
Debtor 2	riistivaine	Wildale Name	Lastin	anie		oplement showing ter 13 expenses a	- · ·		
(Spouse, if filing)	First Name	Middle Name	Last Na	ame	follow	ving date:			
United States Bank	cruptcy Court for the	EASTERN DIST	RICT OF	TEXAS	MM /	DD / YYYY	_		
Case number (if known)									
Official Form 1	 06J								
Schedule J: Y		es					12/1		
orrect information.	If more space is n	<u>-</u>	er sheet to	ling together, both are this form. On the top					
Part 1: Descr	ribe Your Hous	ehold							
. Is this a joint cas	se?								
No	Debtor 2 live in a so	separate household? ile Official Form 106J- No		s for Separate Househ	old of Debto	or 2.			
Do not list Debtor Debtor 2.		Yes. Fill out this infor each dependent.		Dependent's relation Debtor 1 or Debtor 1		Dependent's age	Does depended live with you?		
				Son		<u> 26 </u>	□ No - ☑ Yes		
Do not state the on names.	dependents'						No No		
							Yes		
						_	Yes		
							□ No - □ Yes		
							□ No		
. Do your expense	ple other than	<ul><li>✓ No</li><li>✓ Yes</li></ul>					Yes Yes		
expenses of peo yourself and you									
expenses of peo yourself and you	ate Your Ongo	ing Monthly Expe	enses						
expenses of peogetic yourself and you  Part 2: Estimate your expenses as report expenses as	ses as of your ban s of a date after the		nless you a	are using this form as a supplemental Sched		<del>-</del>			
expenses of peographic yourself and yourself and yourself and yourself and yourself and yourself and the stimate your expenses as the form and fill in the clude expenses pair	ses as of your ban s of a date after the e applicable date. id for with non-cas	kruptcy filing date un e bankruptcy is filed. sh government assist	nless you a . If this is a	a supplemental Sched u know the value of		<del>-</del>			
expenses of peo yourself and you Part 2: Estimate your expenses are report expenses are form and fill in the	ses as of your ban s of a date after the e applicable date. id for with non-cas	kruptcy filing date u e bankruptcy is filed.	nless you a . If this is a	a supplemental Sched u know the value of		<del>-</del>	op of		
expenses of peogety yourself and yourself and yourself and yourself and yourself are expenses as the form and fill in the clude expenses paid assistance and the rental or hould and the first mortes.	ses as of your ban s of a date after the e applicable date. id for with non-cas have included it o me ownership exp gage payments and	kruptcy filing date un e bankruptcy is filed. sh government assist	nless you a . If this is a tance if you ncome (Offi	a supplemental Sched u know the value of		k the box at the t	op of es		
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4d. Homeowner's association or condominium dues

4d.

Deb	tor 1	Elsie N. Umoh	Case number	ase number (if known)			
				Your ex	penses		
5.	Addit	tional mortgage payments for your residence, such as h	nome equity loans	5			
6.	Utiliti	ies:					
	6a. I	Electricity, heat, natural gas		6a.	\$300.00		
	6b. \	Water, sewer, garbage collection		6b.	\$75.00		
		Telephone, cell phone, Internet, satellite, and cable services	(See continuation sheet(s) for details)	6c	\$296.00		
		Others Consider C II DI		6d.	\$50.00		
7.	Food	I and housekeeping supplies		7.	\$450.00		
8.		dcare and children's education costs		8.			
9.	Cloth	ning, laundry, and dry cleaning	(See continuation sheet(s) for details)	9.	\$100.00		
10.	Perso	onal care products and services		10.	\$150.00		
11.	Medi	cal and dental expenses		11.	\$50.00		
12.		sportation. Include gas, maintenance, bus or train Do not include car payments.		12.	\$150.00		
13.	Enter	rtainment, clubs, recreation, newspapers,		13.	\$50.00		
14.	·	azines, and books itable contributions and religious donations		14.	\$0.00		
		rance.			•		
		ot include insurance deducted from your pay or included in	lines 4 or 20.				
	15a.	Life insurance		15a			
	15b.	Health insurance		15b			
	15c.	Vehicle insurance		15c	\$275.00		
	15d.	Other insurance. Specify:		15d			
16.	Taxe:	, , ,		16.			
17.	Insta	Ilment or lease payments:					
	17a.	Car payments for Vehicle 1 2016 Nissan Sentra		17a	\$430.00		
	17b.	Car payments for Vehicle 2		17b			
	17c.	Other. Specify: Restitution Payment		17c	\$300.00		
	17d.	Other. Specify:		17d			
18.		payments of alimony, maintenance, and support that y	•	18			
19.	<b>Othe</b> i	r payments you make to support others who do not live	•	19.			
20.		r real property expenses not included in lines 4 or 5 of solute I: Your Income.					
	20a.	Mortgages on other property		20a			
	20b.	Real estate taxes		20b			
	20c.	Property, homeowner's, or renter's insurance		20c			
	20d.	Maintenance, repair, and upkeep expenses		20d			
	20e.	Homeowner's association or condominium dues		20e			
21.	Othe	r. Specify: See continuation sheet		21. +	\$184.00		

Deb	tor 1	Elsie N. Umoh	Case number (if known	)		
22.	Calcu	alate your monthly expenses.	_			
	22a.	Add lines 4 through 21.	22a.	\$4,118.00		
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106.	J-2. 22b.			
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$4,118.00		
23.	Calcu	alate your monthly net income.				
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$4,908.22		
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>–</b>	\$4,118.00		
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$790.22		
24.	Do yo	ou expect an increase or decrease in your expenses within the year after	you file this form?			
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?					
		No				
	<b>Ø</b> '	Yes. Explain here:  Debtor has not received a pay check with health insurance d	eductions			

Deb	tor 1 Elsie N. Umoh	Case number (if knowr	n)
6c.	Telephone, cell phone, Internet, satellite, and cable services (details): Cable TV, etc Internet/Phone	_	\$207.00 \$89.00
		Total:	\$296.00
9.	Clothing, laundry, and dry cleaning (details): Clothing	Total:	\$100.00 \$100.00
21.	Other. Specify: Tolltag Bank Fees American Home Shield	_	\$120.00 \$12.00 \$52.00
		Total:	\$184.00

Fill in this information to identify your case:						
Debtor 1	Elsie First Name	N. Middle Name	Umoh Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF TEXAS</b>						
Case number (if known)						

☐ Check if this is an amended filing

## Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

#### Part 1: **Summarize Your Assets**

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$224,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$19,978.02
1c. Copy line 63, Total of all property on Schedule A/B	\$243,978.02

#### **Summarize Your Liabilities** Part 2:

Your liabilities Amount you owe

- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$189,630.42 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)
- \$582,500.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....
  - \$186,986.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....

Your total liabilities

\$959,116.42

### Part 3: **Summarize Your Income and Expenses**

- Schedule I: Your Income (Official Form 106I) \$4,908.22 Copy your combined monthly income from line 12 of Schedule I.....
- Schedule J: Your Expenses (Official Form 106J) \$4,118.00 Copy your monthly expenses from line 22c of Schedule J.....

Deb	otor 1	Elsie N. Umoh Case number (if known)			
Part 4: Answer These Questions for Administrative and Statistical Records					
ò.	Are	you filing for bankruptcy under Chapters 7, 11, or 13?			
		No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes			
7.	Wha	at kind of debt do you have?			
	$\square$	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.			
		Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.			
3.		th the Statement of Your Current Monthly Income: Copy your total current monthly income from sial Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.			
Э.	Сор	y the following special categories of claims from Part 4, line 6 of Schedule E/F:			

	Total claim				
From Part 4 on Schedule E/F, copy the following:					
9a. Domestic support obligations. (Copy line 6a.)	\$80,000.00				
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$500,000.00				
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00				
9d. Student loans. (Copy line 6f.)	\$0.00				
<ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li> </ol>	\$0.00				
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00				
9g. <b>Total.</b> Add lines 9a through 9f.	\$580,000.00				

Fill in this information to identify your case:				
Debtor 1	Elsie First Name	N. Middle Name	Umoh Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF TEXAS</b>				
Case number (if known)				

☐ Check if this is an amended filing

## Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below				
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?				
☑ No				
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).			
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are				
true and correct.				
X /s/ Elsie N. Umoh	X			
Elsie N. Umoh, Debtor 1	Signature of Debtor 2			
Date <u>03/06/2017</u> MM / DD / YYYY	Date MM / DD / YYYY			